

A New Cancer Strategy

Backbench Business, Commons Chamber, Thursday 19 November 2015

A debate on a motion relating to a new cancer strategy has been scheduled by the Backbench Business Committee following a bid from John Baron, Jo Churchill and David Tredinnick.

John Baron, Conservative MP for Basildon and Billericay will open the debate.

The Government allocates a certain number of days in the chamber for debates selected by the [Backbench Business Committee](#). It is up to the Committee to decide what subjects it will schedule for debate. The Committee meets every week on a Tuesday to hear requests from any backbench Member of Parliament. Mr Baron's request to the Committee for this debate may be seen on [parliamentlive.tv](#)

The proceedings of this debate may be watched on [parliamentlive.tv](#)

1. Cancer Strategy for England

1.1 Independent Cancer Taskforce

The [Independent Cancer Taskforce](#) was established by NHS England in January 2015. The aim of the taskforce was to develop a five year strategy for cancer services in England, with the ambition to improve survival rates and save lives.

The taskforce was asked to align its strategy with that of the [Five Year Forward View](#) – a shared vision for the NHS which was published in October 2014.

The taskforce has been chaired by the Chief Executive of [Cancer Research UK](#), Harpai Kumar.

1.2 Cancer Report

In July 2015, the Independent Cancer Taskforce published its report:

- [Achieving World Class Cancer Outcomes: A Strategy for England 2015-2020](#)

The report outlined improvements to cancer care in England which could mean an additional 30,000 patients every year could survive cancer for 10 years or more by 2020.

One of the main aims was to work on earlier diagnosis, which according to the strategy could increase survival rates for 11,000 patients alone.¹

1.3 NAO Report

The National Audit Office published a report into cancer services in England in January 2015. Despite noting the success of the NHS and Department of health in implementing the Cancer Reform Strategy (2010), they highlighted several areas for improvement in cancer care and patient outcomes. The full report, [Progress in improving cancer services and outcomes in England](#), is available from the NAO website.

¹ The report is summaries in the accompanying [press release](#), published 19 July 2015.

2. Further Information

2.1 House of Commons Briefings

The following Library briefings may be of interest in relation to this debate. They are available online or in hard copy at request to the Members' Library.

Commons Library Debate Pack, [The Availability of Cancer Drugs](#), CDP2015/76

Commons Library Briefing, [Cancer Statistics: In Brief](#), SN06887

Commons Library Briefing, [Cancer Statistics: In Detail](#), SN02677

Commons Library Briefing, [Cancer: Waiting Times for Diagnosis and Treatment](#), SN07043

2.2 Cancer Taskforce

The Cancer Research, [Cancer Taskforce website](#) has further information on the taskforce, a copy of the strategy report and accompanying press releases, as well links to blog articles and the original call for evidence. It may be accessed at:

<http://www.cancerresearchuk.org/about-us/cancer-taskforce>

The [NHS England press release](#), announcing the launch of the Independent Cancer Taskforce on 11 January 2015, provides further details of the aims of the taskforce as well as announcements on funding for new radiotherapy treatments and innovations in early diagnosis: <https://www.england.nhs.uk/2015/01/11/beat-cancer/>

2.3 NAO Reports

The National Audit Office have published a series of reports into cancer care services in the UK:

- [Progress in improving cancer services and outcomes in England](#) (Jan 2015)
- [Investigation into the Cancer Drugs Fund](#) (Sep 2015)
- [Delivering the Cancer Reform Strategy](#) (Nov 2010)
- [The NHS Cancer Plan: A Progress Report](#) (Mar 2005)

3. Press Releases

Department of Health, 13 September 2015

From 2020, people with suspected cancer will be diagnosed faster

The government has pledged that from 2020, people with suspected cancer will be diagnosed within 28 days of being referred by a GP.

According to the Independent Cancer Taskforce, set up as part of the NHS's Five Year Forward View to examine how to improve cancer care and survival rates, the target to diagnosis all suspected cancer cases within 28 days could help save up to 11,000 lives a year.

Jeremy Hunt, the Secretary of State for Health said:

For people who are worried they may have cancer, waiting for that all important test result is a nerve-wracking time. We have a duty to make sure this period of uncertainty is as short as possible.

For those who get the all clear, they will have peace of mind sooner.

Those who sadly have cancer will get treatment much quicker and we will save thousands of lives as a result.

Mr Hunt also announced new measures to develop a tailored recovery package for everyone surviving cancer. A more personalised treatment plan and better support to live well, with and beyond the disease.

New measures to help personalise people's treatment and care include:

- around 20,000 additional people a year having their cancers genetically tested to identify the most effective treatments, reducing unnecessary chemotherapy sessions
- by 2020, patients will be able to access online information about their treatment and tests results
- access to physical activity programmes, psychological support and practical advice about returning to work
- help for those suffering with depression to make sure they have the right care at the right time
- by 2017, there will be a new national quality of life measure to help monitor how well people live after their treatment has ended, so priorities for improvements can be identified

The government has committed to spend up to £300 million more on diagnostics every year over the next 5 years to help meet the new 28 day target.

Health Education England will start a new national training programme that will provide 200 additional staff with the skills and expertise to carry out endoscopies by 2018. This is in addition to the extra 250 gastroenterologists the NHS has already committed to train by 2020. Endoscopies are tests where the inside of your body can be examined for cancer.

The newly trained staff will be able to carry out almost a half a million more endoscopy tests on the NHS by 2020.

Harpal Kumar, chair of the Independent Cancer Taskforce, said:

These commitments are going to save thousands of lives and deliver a step change in patient experience and quality of life, so this is fantastic news. Diagnosing more cancers earlier could transform patients' lives as it improves survival. But we've shown that services for diagnosing cancer are under immense pressure, which is why increased investment and extra staff are so important. Introducing the 28-day ambition for patients to receive a diagnosis will maximise the impact of this investment which, together with making results available online, will spare people unnecessary added anxiety and help cancer patients to begin treatment sooner.

It's also great that molecular diagnostic tests will be made routinely available to all patients who might benefit. These tests can help doctors provide more tailored treatments that may improve survival and potentially reduce side effects from less effective treatments.

At the heart of the recommendations in the cancer strategy is our desire for patients to have the best outcomes and care in the world. It's now up to the Government and NHS to make sure today's commitments are introduced without delay, and we await further detail on how they will take forward the rest of the strategy. This is a great start.

The NHS will identify 5 hospitals across the UK to pilot the new target before the programme is rolled out nationally by 2020.

NHS England

NHS launches new bid to beat cancer and save thousands of lives

NHS England today (Sunday) announced a new independent taskforce to develop a five-year action plan for cancer services that will improve survival rates and save thousands of lives.

It also launched a major new programme to test innovative ways of diagnosing cancer more quickly at more than 60 sites across the country, and committed a further £15m over three years to evaluate and treat patients with a type of modern radiotherapy.

More than one in three people in the UK develop cancer and half will now live for at least ten years – forty years ago average survival was just one year. But for some cancers patients are being diagnosed late so that some survival rates are below the European average.

The taskforce has been asked to deliver the vision set out in the [NHS Five Year Forward View](#), which calls for action on three fronts: better prevention; swifter diagnosis; and better treatment, care and aftercare for all those diagnosed with cancer.

Chaired by Cancer Research UK Chief Executive Harpal Kumar, the taskforce will work across the entire health system. It will include cancer specialist doctors and clinicians, patients groups and charity leaders, including Macmillan Cancer Support, Public Health England, local councils, and the Royal College of GPs.

It will consider prevention, first contact with services, diagnosis, treatment, support for those living with and beyond cancer, and end-of-life care, as well as how all these services will need to develop and innovate in future. It will assess the opportunity for improved cancer care by March 2015 and produce a new five-year cancer strategy by the summer.

Alongside the taskforce, NHS England announced:

- **the launch of a major early-diagnosis programme**, working jointly with Cancer Research UK and Macmillan Cancer Support, testing seven new approaches to identifying cancer more quickly. The aim is to evaluate a number of initiatives across more than 60 sites around the country to collect evidence on approaches that could be implemented from 2016/17. Initiatives will include: offering patients the option to self-refer for diagnostic tests; lowering referral thresholds for GPs; and multi-disciplinary diagnostic centres where patients can have several tests in the same place on the same day.
- **the extension of NHS England's Commissioning through Evaluation programme to innovative radiotherapy treatment, stereotactic ablative radiotherapy (SABR)** costing in the region of £5m each year. This new commitment comes following a campaign led by former England rugby captain Lawrence Dallaglio, aiming to make SABR more widely available to cancer patients in England. NHS England's evaluation programme will enable the number of cancer patients eligible to access SABR treatment to rise significantly, by 750 new patients a year. The programme will widen the number of cancers being treated to include the treatment of oligometastatic disease (cancer that has spread to another part of the body), primary liver tumours, spinal tumours, the re-irradiation of cancers in the pelvis and other selected indications. This investment is in addition to NHS England's pledge to fund up to £6m over the next five years to cover the NHS treatment costs of SABR clinical trials led by Cancer Research UK.
- **An improvement to the monitoring of cancer survival at a local level. NHS England** will include a one-year cancer survival indicator in the assurance system used to ensure Clinical Commissioning Groups are delivering. This puts cancer survival at the front and centre for every single CCG across the country.

Harpal Kumar, Chief Executive of Cancer Research UK and head of the NHS cancer taskforce, said: "The Five-Year-Forward View has set out a compelling vision for the delivery of health services. We now need to turn the vision into a reality for the thousands of patients diagnosed with cancer every week. We also know that many more people will be diagnosed with cancer in the years ahead. Cancer Research UK is projecting an increase of a third in the number of cases over the next 15 years. So the time is right to set new ambitions and to take a fresh look at how we will meet this need. I am honoured to have been asked to lead this cross-system group which will address this."

Lawrence Dallaglio, campaigner for improved cancer services, said: "This project is a significant step forward for patient access to advanced radiotherapy in our country. It will double the number of cancer patients being treated with SABR, more than double the number of cancers treated and, just as importantly, lead the way for patients to be treated within their own regions. There remains a good way to go but this agreement shows that when we all work together great things can be achieved."

NHS England's chief executive, Simon Stevens, said: "Cancer survival rates in England are at an all-time high, but too many patients are still being diagnosed late – up to one in four only when they present in A&E. So it's time for a fresh look at how we can do even better – with more focus on prevention, earlier diagnosis and modern radiotherapy and other services so that over the next five years we can save at least 8000 more lives a year."

4. Parliamentary Business

4.1 Debates

Secondary Breast Cancer [[HC Deb 21 Oct 2015 c408WH](#)]

A Westminster Hall Debate was held on the motion “that this House has considered secondary breast cancer”. In his submission, Craig Tracey the member in charge of the debate, made several references to the new cancer strategy welcoming many of the recommendations in relation to secondary cancer.

Availability of Cancer Drugs [[HC Deb 20 Oct 2015 265WH](#)]

This Westminster Hall debate, led by Jim Shannon, concentrated on how available cancer drugs were to patients in relation to the Cancer Drugs Fund.

Improving Cancer Outcomes [[HC Deb 5 Feb 2015 c486](#)]

This debate, led by Mr John Baron, considered the launch of new cancer strategy and what the House wished to see from the report.

4.2 Parliamentary Questions

Cancer: Screening [[5889](#)]

Asked by Jim Shannon on 7 July 2015

To ask the Secretary of State for Health, if he will assess the potential merits of introducing routine follow-up checks for people who have received negative results when tested for cancer.

Answered by Jane Ellison on 15 July 2015

Increasing the capacity of diagnostic and imaging services is clearly recognised as a priority for the National Health Service and it has been raised as a key issue by the independent Cancer Taskforce, as well as by the Cancer Waiting Times Taskforce. We expect a new cancer strategy to be published later this month which will set out the strategy for the system for the next five years and will include consideration of the whole cancer pathway, including the capacity of diagnostic services. However, we are not aware of any specific plans to introduce follow-up checks for people who have received negative results when tested for cancer.

NHS England has launched a major early diagnosis programme (Accelerate, Co-ordinate, Evaluate – ACE), working jointly with Cancer Research UK and Macmillan Cancer Support to test new innovative approaches to identifying cancer more quickly, including offering patients the option to self-refer for diagnostic tests.

NHS: Consistency in Services and Treatment

[[HC Deb 13 Oct 2015 c159](#)]

Tom Pursglove: I thank the Minister for that answer, but earlier this year figures published by Public Health England showed that more people under the age of 75 die from cancer in Corby than anywhere else in England. What steps are Ministers taking to help to improve those rates? They are stubbornly high, and we need to stop the higher prevalence of cancer in our area.

George Freeman: My hon. Friend makes an important point. The Government are absolutely committed to world-class cancer care, which is why we put £1 billion into the cancer drugs fund. We have seen a huge 71% increase in cancer referrals, with 40,000 more patients treated, and a new cancer strategy has just been set out. It is true that the incidence of cancer in my hon. Friend's constituency is regrettably high, and Corby CCG has significantly worse cancer outcomes. That has been recognised and the 2015-16 commissioning plan puts in place a series of measures on cancer, including improving earlier diagnosis, providing treatment within 62-day referral targets and implementing the national cancer survivorship programme.